

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AJ		
O.I.P.E. CLASSIFIER			4-4-90
FORMALITY REVIEW	LH	60103	4-4-90
RESPONSE FORMALITY REVIEW			5-3-90

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	1/20/90
2	1/20/90
3	1/20/90
4	1/20/90
5	1/20/90
6	1/20/90
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8	1/20/90
9	1/20/90
10	1/20/90
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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